

**CASE SPECIFIC POWER OF ATTORNEY WHERE MULTIPLE ASSIGNEES  
ARE PRESENT OR IF THERE IS NO ASSIGNEE**

<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	Application Number	10/528,360
	Filing Date	March 18, 2005
	First Named Inventor	Haruo SUGIYAMA, et al.
	Title:	SUBSTITUTED TYPE PEPTIDES OF WT1
	Attorney Docket Number:	283124US0X PCT

I hereby appoint:			
<input type="checkbox"/> Practitioners associated with the Customer Number		<div style="border: 1px solid black; padding: 10px; display: inline-block; font-size: 24px;">22850</div>	
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.			
Please recognize or change the correspondence address for the above-identified application to:			
<input type="checkbox"/> The address associated with the above-mentioned Customer Number.			
I am the:			
<input type="checkbox"/> Inventor.			
<b>SIGNATURE OF INVENTOR</b>			
Signature	<i>Haruo Sugiyama</i>		
Name	Haruo SUGIYAMA	Telephone	
Date	<i>February 5, 2006</i>		
Signature	<i>Masashi Gotoh</i>		
Name	Masashi GOTOH	Telephone	
Date	<i>January 19, 2006</i>		
Signature	<i>Hideo Takasu</i>		
Name	Hideo TAKASU	Telephone	
Date	<i>January 19, 2006</i>		

Signature	<i>Fumio Samizo</i>		
Name	Fumio SAMIZO	Telephone	
Date	<i>January 24, 2006</i>		
Signature	<i>Naoto Kusunose</i>		
Name	Naoto KUSUNOSE	Telephone	
Date	<i>January 23, 2006</i>		
Signature	<i>Masashi Nakatsuka</i>		
Name	Masashi NAKATSUKA	Telephone	
Date	<i>January 24, 2006</i>		
* NOTE: Signatures of all the inventors are required. Total of _____ forms are submitted.			

**THIS FORM IS USED FOR PATENT APPLICATIONS HAVING MULTIPLE ASSIGNEES  
OR IF THERE IS NO ASSIGNEE**